



JAB & GAB



The Wyoming Immunization Program Newsletter www.immunizewyoming.com

From the Manager's Desk by Katelyn Wells

HPV Media Campaign

WIP will be releasing a print and radio media campaign in April regarding the importance of HPV and the newly expanded eligibility criteria under the WyVIP program. The cancer prevention message will be the focus of the campaign. We ask that you order sufficient vaccine stock to meet the increased demand. Most importantly, if your practice has not incorporated this vaccine into the list of vaccinations provided, we ask that you seriously consider providing this vaccine in addition to all other WyVIP vaccines. Please see the example of the newspaper article that is included as an insert.

Resignation of Katelyn Wells M.S.

It deeply saddens me to announce that I will be resigning as the Immunization Program Section Chief as of April 2, 2007. I am extremely grateful for the opportunity to serve the citizens of Wyoming and you, the provider, during the past three years. You have been a great partner through many changes that took place in the program over the past few years. We have overcome many obstacles in regards to the federal audit that changed how you provided vaccine to the children of Wyoming. This led us to accomplish what many other states have failed to provide; free vaccines for all children. Truly, I applaud you for all your support and efforts during this time.

I will be returning home to Tennessee to complete my Dissertation for my Doctoral degree in Health Promotion. I hope to continue to work as an immunization advocate on a National level.

Thank you again for all your support.

Best Wishes,

Katelyn

New "Pink" Books to Arrive Soon: by Andrea Clement-Johnson

There 10th and latest edition of the Epidemiology and Prevention of Vaccine-Preventable Diseases, also known as the "pink" book, has now been published. We have placed orders and you will be receiving one for your office. Since there have been quite a few changes in the world of immunizations, we encourage you to read the new manual as soon as possible. In addition, you may request assistance from Clinical Services or directly from the CDC via their contact information in the manual. Thanks very much!



Wyoming Department
of Health
Jab & Gab

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**Don't forget to check
your email for
communication
from us!**





World of the Vaccine Office

Influenza Clinics & Balancing Supply and Demand/Utilization, by Christina Gargano

WyVIP has a contingency plan in place in the event that vaccine is delayed or the supply is insufficient throughout the transition phase to the new distributor “McKesson”. By ensuring that all providers now have an adequate amount of vaccine in their refrigerators, we can now concentrate on the continuation of the Influenza campaign. You all have worked so hard throughout this season by vaccinating Wyoming’s Very Important People and we commend that work on behalf of the children of Wyoming. There are still so many children that have not received their Influenza shot this season and could greatly benefit. CDC has suggested the continuation of Flu Clinics at malls, supermarkets, doctor’s offices, schools, pharmacies, etc. We want to promote influenza vaccine utilization to optimize health protection of the Wyoming Child population and minimize waste of vaccine. If you need to place another order for flu vaccine, call the Vaccine Office at 777-8982 or fax in the order marked CLINIC to 777-3615.

Young children are at highest risk. Children <6 months of age have the highest rates of hospitalization and medically attended illnesses of any age group, but no licensed influenza vaccine is available for this age group. There is no licensed effective antiviral available for the population. Children <6 months of age are underserved and at great risk, even greater than the elderly population. To protect these children we must vaccinate others that come into contact with the very young. To date in the US we have 18 child deaths from pericarditis.

Thermometers by Christina Gargano, Vaccine Manager and Joanna Briggs, RN, Clinical Coordinator

Every space which stores WyVIP vaccine should have:

One (1) **Temp-Chex** Enviro-Safe thermometer (Refrigerator)

One (1) **Temp-Chex** Enviro-Safe thermometer (if you store Varicella)

Two (2) Fisher-Scientific thermometer(s); one for the freezer (if you store Varicella) and one for the refrigerator

This is the basic numbers for one full size refrigerator storing vaccine. If more units are in use, you will need to adjust accordingly. The two types of thermometer allows us to meet the CDC standard of certification for all store vaccines and allows for an accuracy check of the thermometer.

Both of the Temp-Chex refrigerator and freezer thermometers must be placed upright in the center of the unit (center is middle of left/right, top/bottom and front/back). This does not allow you centrally locate the probe, the supplied magnet is not to be used as indicated in the insert. Walls of units become colder than the central section. We recommend that you stabilize the pipette in the center of the unit.

The Fisher-Scientific Thermometer control box(s) (white) should be secured on the OUTSIDE the refrigerator or freezer. The Fisher-Scientific thermometers need to read within 1-2 degrees of the Temp-Chex pipette thermometers.

If anyone has not received the appropriate number and types of Temp-Chex refrigerator pipette, Temp-Chex freezer pipette, or the Fisher Scientific Digital Thermometer for each space that stores WyVIP vaccine, please email Lily Valdez at lvalde2@state.wy.us.

WyVIP Suggestion Box is now open! By Christina Gargano

As a customer service tool we are now implementing a new way of communicating any suggestions you may have for the WyVIP program. We hope that in the upcoming months of transitioning this can be used as a tool in which you the customer can better be served. We look forward to serving you and helping Wyoming’s Very Important People. To use the suggestion box just simple email any comments with your contact info to WYVIP_SuggestionBox@state.wy.us and they will be addressed in the upcoming newsletters and in personal emails as well.



School House Rocks! April and May Events & Trainings

by Andrea Clement-Johnson

4/10/2007-Wyoming Vaccine Advisory Board Meeting w/Dr. Sherard, 9:00-Noon

April 11-14 Mobilizing Partnerships for Social Change, Community-Campus Partnerships for Health's 10th Anniversary Conference City: Toronto, ON Canada

Location: Toronto Hilton Contact: Annika Sgambelluri Phone: 206-616-3472

Email: annikalr@u.washington.edu Website: www.ccph.info

April WIP Monthly Teleconference w/Dr. Sherard

Wednesday, April 18, 12:15-1:30 p.m. Call-in 877-278-8686,

Participant ID 658125

National Infant Immunization Week-April 23-27

10th Annual Conference on Vaccine Research

Dates: April 30-May 2, 2007

Location: Baltimore, Maryland

Website: www.nfid.org/conferences/vaccine07

Contact information: Call 301-656-0003

May 14-19 2007 Appalachian Summer Institute of Epidemiology City: Johnson City, Tennessee Location: East Tennessee State University Contact: Darla Dye, Program Coordinator

Phone: 800-222-3878 Email: dyed@mail.etsu.edu

Website: <http://www.etsu.edu/scs/applepi.htm>

Northwest Immunization Conference

Dates: May 15-16, 2007

Location: Hilton Hotel, Portland, Oregon

Website: www.regonline.com/immunization2007

May WIP Monthly Teleconference w/Dr. Sherard

Wednesday, May 16, 12:15-1:30 p.m. Call-in 877-278-8686,

Participant ID 658125



*FYI-April 17-19, Several staff will be attending the McKesson Open House to learn more about the new distribution methodology. We will share this information with you upon returning.

April Notes from the Road

Joanna Briggs, RN Clinical Coordinator

I have just returned from the National Immunization Conference in Kansas City, MO. What an adventure in sensory overload. I hear some new and exciting things as well as changes in the immunization world that I wanted to share.

Did you know that 1% of MMR doses that are administered report a rash?

The 4 day grace period (**Wyoming does not recognize this**) does not apply if you are talking about 2 different vaccine types. For instance, don't use the 4 day rule if you are talking MMR and Varicella being spaced 1 month apart. They really mean one calendar month apart.

I have had recent reports of vaccines being given IM in the gluteus. At no time and no age is this approved for gluteus injection. The antigen is not absorbed properly and the antibodies are not produced for immunity. Choices are nice when given to older children/adolescents but give them left or right arms or thighs. The HPV insert states "OR higher anterolateral area of the thigh." See D9 in your Pink Book.

Also the newest on traveling with vaccine to out lying clinics with a cooler, ice pack and thermometer. They now require **HOURLY** temperature checks. I suggest the cooler has a temp log taped to the lid and a Fischer Scientific thermometer also taped to this cooler. You can read it without opening the box and also the min/max will help monitor extremes. Remember the travel temp log needs forwarded to Cheyenne with your monthly refrigerator logs.

There were more antigens given 100 years ago in a smallpox vaccination than we give in 1 visit for childhood vaccinations.

VAERS requests that any Clinical Significant Event is reported. Realize that 85, 000 reports are filed yearly of the millions of doses administered. 85% of the reports are non-serious; 14% are serious non-fatal and less than <1% result in death.

1 in 40,000 doses of MMR result in thrombocytopenia (decrease in the number of blood platelets), and cause no problem or symptoms.

There has never been a recall on safety of products. Recalls have had to do with efficacy being less than stated.

"Does shaking make an MMR less painful?" Don't know. The insert clearly state that the diluents and vaccine needs to be agitated to assure a good dissolving of the vaccine. Now I questions "Do you remove the needle, shake well and then withdraw vaccine so this occurs? Or is the bottle swirled around on the end of the needle?" Might give that a try and see if this makes a different. Let me know will you?

Gardasil instructions state "SHAKE WELL BEFORE USE Thorough agitation immediately before administration is necessary to maintain suspension of the vaccine." Patients report that the vaccine stings and may be relate to the last item.

Gardasil forecasting is not working properly (3/20/07). John is working with our vendor and should have it going by the time we get to the 3rd dose.

During our monthly teleconference there was a question regarding Varicella for adolescents. This issue is still being discussed and we will share the outcome with you as soon as possible.

Wyoming is truly fortunate to have our forward thinking legislators and their generous financial support for Wyoming children. With that, we are also given the responsibility to see that children receive the needed vaccines on time. You have heard me talk about raising rates and the impact of our rates on allocations. So, when listening to what other states have been able to do, I challenge you to have Wyoming on the stage in coming years as recipient of these awards.

4-3-1-3-3-1 (4DTaP, 3IPV, 1MMR, 3Hib, 3HepB, 1Varicella) Most improved from 2002 – 2005 were:

North Dakota	72.4% (+, -7.5)	up from 50.0%	(22.4% increase)
Colorado	74.6% (+, -6.5)	up from 52.2%	(22.4% increase)
Nebraska	85.3% (+, -5.8)	up from 65.7%	(19.6% increase)

Massachusetts 87.2% \pm 5.2 (lost Universal funding in 2006) and Nebraska 83.5% (+, -5.8) (VFC only) are top two leaders for the nation in immunization coverage for 4-3-1-3-3-1, according to the National Immunization Survey (NIS) for 2005. Wyoming reported out in 2005 as 68.0% (+, -8.2) (4-3-1-3-3-1) and a 79.5% (+, -6.9) when we drop the Varicella and look only at 4-3-1-3-3. So a 22% increase would allow us to the 2010 goal of 90% coverage. I know all of you can do it!

DAPTACEL™ Update

By Joanna Briggs, RN Clinical Coordinator

A few months ago I mentioned DAPTACEL is not licensed for the 5th dose. This has raised questions as a few of you are using DAPTACEL exclusively for your DTaP schedule. When the question was raised with the CDC helpline, the response was:

“Data are insufficient to evaluate the use of DAPTACEL™ as a fifth dose among children aged 4--6 years who have received DAPTACEL™ for the previous 4 doses. DAPTACEL™ may be used to complete the vaccination series in infants who have received 1 or more doses of whole-cell pertussis DTP.” They also caution about not missing a dose and administering what is available.

DAPTACEL™ is approved for administration as a 4-dose series at ages 2, 4, 6, and 17--20 months. The Advisory Committee on Immunization Practices (ACIP), the Committee on Infectious Diseases, the American Academy of Pediatrics, and the American Academy of Family Physicians recommend that children routinely receive a series of 5 doses of vaccine against diphtheria, tetanus, and pertussis before age 7 years (1,2). The first 4 doses should be administered at ages 2, 4, 6, and 15--18 months and the fifth dose at age 4--6 years. The customary age for the first dose is 2 months, but it may be given as early as age 6 weeks and up to the seventh birthday. The interval between the third and the fourth dose should be at least 6 months. The following evidence supports the use of DAPTACEL™ for the first 4 doses of the diphtheria, tetanus, and pertussis vaccination series:

1. The rates of local reactions, fever, and other common systemic symptoms following receipt of DAPTACEL™ inoculations were substantially lower than those following whole-cell pertussis vaccination (administered as DTP for doses 1--3 in controlled clinical studies (3,4).
2. Efficacy of 3 doses of DAPTACEL™ against pertussis disease was assessed in a double-blind, randomized, placebo-controlled trial in Sweden (3). Infants were assigned randomly to be vaccinated with either DAPTACEL™, another investigational acellular pertussis vaccine, whole-cell pertussis DTP vaccine, or DT vaccine as placebo at ages 2, 4, and 6 months. The mean length of follow-up was 2 years after the third dose of vaccine. In this trial, pertussis was defined according to the World Health Organization case definition (i.e., a paroxysmal cough illness lasting >21 days and confirmed by culture, serology, or epidemiologic link to a culture-positive household contact). The vaccine efficacy of DAPTACEL™ against WHO-defined pertussis was 84.9% (95% confidence interval [CI]=80.1%--88.6%) (3,4). The protective efficacy of DAPTACEL™ against mild pertussis (i.e., >1 day of cough with laboratory confirmation) was 77.9% (95% CI=72.6%--82.2%) (4). Although a serologic correlate of protection for pertussis has not been established, the antibody responses to the pertussis antigens in DAPTACEL™ among North American infants after 4 doses at ages 2, 4, 6, and 17-20 months was comparable to that achieved among Swedish infants in whom efficacy was demonstrated after three doses at age 2, 4, and 6 months (4).

Because of the reduced frequency of adverse reactions and demonstrated efficacy, ACIP recommends DTaP for all 5 doses of the routine diphtheria, tetanus, and pertussis vaccination series and for the remaining doses in the series for children who have started the vaccination series with whole-cell DTP vaccine (1). ACIP considers the data to be insufficient in terms of safety and efficacy to express a preference among different acellular pertussis vaccine formulations.

Whenever feasible, the same DTaP vaccine should be used throughout the entire vaccination series. Data are limited on the safety, immunogenicity, or efficacy of different DTaP vaccines when administered interchangeably in the primary or booster vaccination of a child. However, if the vaccine provider does not know or have available the type of DTaP vaccine the child to be vaccinated had received previously, any of the licensed DTaP vaccines may be used to complete the vaccination series (1).



**Get WylR'd!****by
John
Anderson****Historical Records**

Please, send us your historical immunization records! I hate to keep repeating myself, but we really would like your office to take advantage of this new service. We have hired on two new staff members in anticipation of receiving more historical immunization records from providers. If your staff has experienced an Advantage Visit in which the records were not present upon the WylR, they know how lengthy the review can be. If we were able to input the records for your office, the review would go much faster. If your office has recently developed an interface and would like to have the “pre-WylR” records input, we can help. If the records are available to providers in the WylR, tools are available that can help increase each facilities immunization rates (i.e., increased visits). Once successfully entered into the WylR, we review the records for Quality Assurance purposes and notify offices once completed. Please contact us and let us know how we can help.

Looking at Developing Interfaces

In addition to inputting historical records, we would like to assist all providers with the management of the immunization process. One such option is the development of an interface between your electronic medical records (EMR) system and the Immunization Registry. The interface may be able to assist with the management of your immunization inventory, thereby freeing up staff time. We have a stated goal of assisting 30 additional offices in interface development for this calendar year. If your office currently has an EMR and would like more information about interface development, please let us know. We will forward the information to our software vendor for appropriate follow-up.

Tandberg See & Share

We mentioned last month that we have been fortunate to provide another mode of training for our providers. With this program, we can send an invitation via email to interested parties, and they can then log onto the meeting and view what we present on our computer. We have already utilized it to connect with one provider, as well as granting access to our software vendor to look at our test database. Imagine, regularly scheduled meetings for training on Mass Immunizations, First Responder, or basic Registry improvements! Our plan is to still get out and meet each new office in person, but for established offices that have additional training needs, we expect to get a lot of use out of this program. We look forward to the implementation of interactive distance training in the very near future. See “Where’s Randy” below for more information on this new service.

Distance Learning Tools

We have contracted with our software vendor, STC, to provide distance-training materials for the Immunization Registry, the First Responder, Mass Immunizations, and School Nurse Modules. We are in the process of internal QA for these various tools, and look forward to having them available to our providers in the very near future. We are excited about this avenue of training as well, and look forward to providing improved customer service in the training area through implementation. See “Where’s Randy” below for more information on this new service, as well.

National Immunization Conference updates

Program Managers from the Immunization Section recently attended the 41st annual National Immunization Conference in Kansas City, MO. In the following months, I will let you know about the information gleaned from the various presentations attended. We are fortunate in that all presentations

Get WyIR'd! (Continued)

will soon be available on the CDC's website in Power Point format. I also was fortunate enough to share our experiences in partnering with the State of Wyoming Bio-Terrorism Program to acquire funding for interface development of the CRA (Counter Response Application) module through a presentation that was made in coordination with STC, our software vendor. So, in the future months, I will let you know about some ideas for quality improvement that we may be able to share with everyone.

Version Upgrades

Part of our focus in the Immunization Registry Program is to constantly provide user upgrades for our database. Whenever a new vaccine comes out, or the recommended dosing schedule is affected, a new upgrade to our system is slated. Unfortunately, these upgrades have to be tested against our test database prior to implementing into production, which can take some time. However, we are very excited to begin testing the latest version upgrade to the system. This upgrade FINALLY contains all of the changes in reporting that were supposed to be originally implemented during the inception of our WyVIP program in September, 2006. I had a chance to initially review the upgrade, as well as meet our project officer with STC, during the National Immunization Conference. I must say, I am pleased at the initial viewing of the upgrade, and know that you will find several reports much improved. When final testing is complete, we will let you know about the changes, as well as provide updates to the I Web User Guides.



Where's Randy?

*By Randy DeBerry, MA,
Registry Trainer*

Over the past months I have had a slight break from the road to focus on the development of new and exciting training materials for WyIR users. However, no month would be complete without at least one new WyIR member. As such, we would like to

welcome Dr. Drew Woodward's Office in Casper to the registry.

I also wanted to take some time this month and inform everybody of some the new training technology we will be employing over the coming months. One of the major programs we will be adopting is called Tandberg See and Share. Although you might have heard a few blips about it in previous newsletters, I wanted to take this opportunity to explain what the program is, how it works, and how it will make everybody's life easier. Tandberg See and Share is a program that allows for group conferencing over the internet. How it works is that you decide to attend a particular conference, you will be sent an email just before the conference is about to start. Contained within that email will be a link to a web site. After left clicking on that link your computer will open to that web page. What makes See and Share so exciting for us is that the webpage you will see is a real time, live image of the conference hosts computer screen. As such, we now have the capability to schedule training seminars where you can see my computer screen from your own office. Combining the Tandberg technology with conference calls will allow me the capability to conduct group-training seminars via the internet on upcoming WyIR application such as the First Responder Module and the new automated ordering system.

We are also currently reviewing new Distance Learning Tools designed by our vendor Scientific Technologies Corporation. This program currently contains twenty seven separate tutorials covering how to perform various registry functions. Although we do not intend for this software to replace person-to-person training, it will serve as an effective addition to the WyIR training materials. Although the tutorial program is still in development, we expect it to be available a few months.



Relevant Contacts 6101 Yellowstone Rd., Ste. 420 Cheyenne, WY 82002

Vaccine Program: Wyoming Vaccinates Important People

Brenda Warburton-Smith

Vaccine Coordinator
307-777-7481
307-777-3615 fax
bwarbu1@state.wy.us

Contact for the following:

- Storage and handling procedures
- Vaccine order form request
- Receipt of vaccine orders
- Anticipated vaccine shipment date
- Vaccine currently available
- Expired/compromised vaccine
- Vaccine returns/transfers
- Flu allocations

Christina Gargano

WyVIP Program Manager
307-777-8982
307-777-3615 fax
cgarga@state.wy.us

Contact for the following:

- WyVIP program comments/complaints
- Staff comments/complaints
- Questions from the public (parents, school nurses, etc.) regarding WyVIP vaccine

Vaccine Manufacturers

GlaxoSmithKline

833-475-8222
www.gsk.com
Lawless Barrientos
303-877-0929

Merck

800-637-2579
www.merck.com
Kathy Parrish
303-973-1615

Sanofi Pasteur

800-822-2463
vaccineshoppe.com
Frank Johns
719-481-5983
Gina Lindner
303-517-1855

Wyeth/Lederle

800-572-8227
Maureen Kane
888-685-5961 x77111
415-564-7575 Voicemail

Wyoming EqualityCare (Medicaid)

Robin Munis

EqualityCare Practitioner Services Manager
307-777-7257
rmunis@state.wy.us

Contact for the following:

- EqualityCare (Medicaid) billing questions
- CPT Coding



Lily Valdez

Vaccine Clerk
307-777-8503
307-777-3615 fax
lvalde2@state.wy.us

Contact for the following:

- To request or verify receipt of the following forms:
 - * WyVIP Enrollment Packets
 - * WyVIP Provider Agreements
 - * WyVIP Policy & Procedure Packets
 - * Doses Administered Reports
 - * Inventory Reports
 - * Temperature Logs
 - * Vaccine Arrival Reports
- WyVIP policies and procedures, including:
 - * Reporting requirements
 - * Eligibility requirements
 - * Non-compliance memos
 - * Incentive Program
 - * Withdrawal from WyVIP Program

Wyoming Immunization Registry (WylR) Program

Randy DeBerry, M.A.

WylR Registry Trainer
307-777-8983
307-777-3615 fax
rdeber@state.wy.us

Contact for the following:

- WylR technical questions
- WylR training questions

Lola Wolfe, Registry Clerk

307-777-1919
LWOLFE@state.wy.us
• Data entry of Registry Records

John Anderson, M.A.

Wyoming Immunization Registry Manager
800-599-9754/ 307-777-5773
307-777-3615 fax
jander2@state.wy.us

Contact for the following:

- WylR general questions
- WylR program comments/complaints
- WylR staff comments/complaints

Health Education & Outreach Program

Andrea Clement-Johnson, M.S., Ed.

Education Consultant & Outreach Specialist/Acting Manager
307-777-8981
307-777-3615 fax
acleme1@state.wy.us

Contact for the following:

- Educational Requests/Questions
- Program comments/complaints
- Program staff comments/complaints
- Program questions

Melinda Grimm

Advantage Visit Data Clerk
307-777-7466
MGRIMM1@state.wy.us
• Data entry of Patient Records
• CoCASA Support

Cie Daniels, LPN

Outreach Specialist
PO Box 1702
Worland, WY 82401
307-214-6709 cell
cdanie@state.wy.us

Contact Cie for 2007 Outreach Visits

Joanna Briggs, RN

Outreach Specialist
23 N. Scott, Ste 14, Sheridan, WY 82801
307-673-8930/307-214-7905 cell
307-673-5368 fax
jbrigg@state.wy.us

Contact Joanna for 2007 Outreach Visits

WIP Administration

Karoleigh Cassel

Administrative Specialist
307-777-7621
kcasse@state.wy.us

Contact for the following:

- To be transferred to the appropriate WIP staff member
- To request, verify receipt or processing of the following:
 - * Literature/material order requests
 - * School nurse registry enrollment packet
 - * Flu marketing materials
 - * Flu clinic website registration forms
- Website questions

Katelyn Wells, M.S.

Wyoming Immunization Section Chief
307-777-6001
kfahli@state.wy.us

Contact for the following:

- WY Immunization Act questions
- Program Manager comments/complaints

WIP Clinical Services

Joanna Briggs, RN

Clinical Coordinator
23 N. Scott, Ste 14, Sheridan, WY 82801
307-673-8930/307-214-7905 cell
307-673-5368 fax
jbrigg@state.wy.us

Contact for the following:

- WyVIP Approved Vaccine Schedules
- ACIP Recommended Schedules
- Dosing by Vaccine Brand/Type
- Vaccine Administration Procedure
- Vaccine Contraindications
- Vaccine Adverse Events
- OSHA and JACO Standards
- Nursing Terminology/Abbreviations



April 2007

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 Orders due by 5:00 p.m.	3 Monthly Reports due	4	5 Orders due by 5:00 p.m.	6	7
8	9 Orders due by 5:00 p.m.	10	11	12 Orders due by 5:00 p.m.	13	14
15	16 Orders due by 5:00 p.m.	17	18 WIP Monthly Tele- conference	19 Orders due by 5:00 p.m.	20	21
22	23 Orders due by 5:00 p.m. National	24 Infant	25 Immunization	26 Orders due by 5:00 p.m. Week	27	28
29	30 Orders due by 5:00 p.m.					

April Schedule of Events

- ☺ **April 3:** Monthly Reports due
 - Doses Administered
 - Inventory Form
 - Temperature Logs
 - Orders due, 5:00 p.m.
- ☺ **April 2/9/16/23/30:** Orders due, 5:00 p.m.
- ☺ April 23-27 National Infant Immunization Week
- ☺ **April 5/12/19/26:** Orders due, 5:00 p.m.
- ☺ **WIP Monthly Teleconference:**
April 18: 12:15-1:30 (please see call-in information under School House Rocks section)

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May Schedule of Events

May 2007

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1 Monthly Reports due	2	3 Orders due by 5:00 p.m.	4	5
6	7 Orders due by 5:00 p.m.	8	9	10 Orders due by 5:00 p.m.	11	12
13	14 Orders due by 5:00 p.m.	15	16 WIP Monthly Tele- conference	17 Orders due by 5:00 p.m.	18	19
20	21 Orders due by 5:00 p.m.	22	23	24 Orders due by 5:00 p.m.	25	26
27	28 Office Closed	29	30	31 Orders due by 5:00 p.m.		

- ☺ **May 1:** Monthly Reports due
 - Doses Administered
 - Inventory Form
 - Temperature Logs
 - Orders due, 5:00 p.m.
- ☺ **May 3/10/17/24/31:** Orders due, 5:00 p.m.
- ☺ **May 7/14/21:** Orders due, 5:00 p.m.
- ☺ **WIP Monthly Teleconference:**
May 16: 12:15-1:30 (please see call-in information under School House Rocks section)
- ☺ **May 28, Office Closed for Memorial Day**

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Shining Stars!

By Lily Valdez

WyVIP congratulates the following providers for earning the **Shining Star Recognition Letter** by submitting their **January reports** correctly by the second business day of February. This is the first letter towards your first award for the 2007 Incentive Award Program. I appreciate your hard work and efforts in helping make this incentive program become a huge success. You did an awesome job!

ABC Pediatrics	Goshen Co PHN	Region V Boces
Albany Co PHN	Green, Richard D., MD	Richardson Family Health Center
Alpha Family Medicine	Granum, Michael J., MD	Riverton Memorial Hospital
Alpine Family Medical Clinic	Health Care for the Homeless	Rock Springs Family Practice, Inc
Arapahoe Health Center	Hot Springs Co PHN	Sheridan Co Comm. Health
Babson & Associates of Primary Care	Independent Family Practice – Afton	Sheridan Family Practice PC
Banner Medical Clinic	Iverson Memorial Hospital, Nursery	South Lincoln Medical Clinic
Bennett, Michele L., MD, PC	Jackson Pediatrics	South Sheridan Medical Center
Big Horn Basin Children's Clinic	Johnson Co PHN	St. John's Medical Center
Big Horn Clinic	Kurt Johnson MD, PC Family Med	Star Valley Family Physicians
Big Horn Co PHN – Greybull	Lander Medical Clinic	Star Valley Medical Center
Big Horn Co PHN - Lovell	Laramie Clinic	Strong Tree Clinic
Big Horn Pediatrics	Laramie Pediatrics	Sublette Co PHN
Brown, Craig, MD	Laramie Physicians for Women and Children	Sweetwater Co Comm. Nursing Svcs – Green River
Campbell Co Health Dept	Lincoln Co PHN – Afton	Sweetwater Co Comm. Nursing Svcs – Rock Spgs
Carbon Co PHN - Rawlins	Lincoln Co PHN – Kemmerer	Sweetwater Pediatrics, PC
Carbon Co PHN – Saratoga	Medicine Bow Health Center	Teton Co PHN
Castle Rock Medical Center	Memorial Hospital of Carbon Co	Thayne Family Medical Clinic
Cesko Family Medicine	Memorial Hospital of Sheridan Co	The Family Clinic, LLC
Cheyenne Children's Clinic	Memorial Hospital of Sweetwater Co	Total Family Health, PC
Cheyenne Family Medicine	Michael D. Adams, MD, PC	Uinta Co PHN – Evanston
Cheyenne Health & Wellness Center	Moorcroft Clinic	Uinta Co PHN – Lyman
Community Health Center of Central Wyoming	Mountain View Medical Center	Uinta Family Practice
Converse Co PHN	Myers, Harlen, MD	Urgent Care Systems
Crook Co PHN	Niobrara Co PHN	UW Family Practice
Ellbogen, David A., MD	North Big Horn Hospital Clinic	UW Student Health
Emerg-A-Care	Northeast Wyoming Pediatrics	Wagon Circle Medical Clinic
Family Care Clinic, LLC	Oregon Trail Rural Health Clinic	Washakie Co PHN
Family First, PC	Park Co PHN – Cody	Western Family Care
Family Medical Care	Park Co PHN - Powell	Western Medical Associates, LLC
Family Medical Center	Pediatric and Adolescent Clinic, Inc	Weston Co PHN
Fisher, Carol A., MD	Platte Co Memorial Hospital	Women's Health Center
Fremont Co Pediatric Clinic	Platte Valley Medical Clinic	Woodward, Drew, MD, PC
Fremont Co PHN - Lander	Pockat, Tom, MD	
Fremont Co PHN – Riverton	Quinn, Michael J., MD-FAAP	
Goodell, Thomas P., MD, PC	Rawlins Family Medical	
Goose Creek Pediatrics	Red Rock Family Practice	



*As a reminder if you are a PHN office you will not be receiving a recognition letter, but you will be getting recognition in the Jab & Gab.

* If you were unintentionally left off either list, please contact Lily Valdez to verify your Jab & Gab status. If there is an error, WyVIP will be happy to recognize your healthcare facility in the following month's Jab & Gab. Thank you for your understanding.